

P14000101683

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

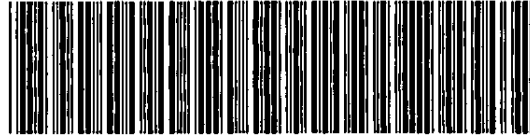
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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\*\*128.75

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

14 DEC 22 AM 8:47

APPROVED  
AND  
FILED

144

**COVER LETTER**

**Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314**

**SUBJECT: MANOR PORTFOLIO, INC.**

Enclosed is an original and one (1) copy of the Certificate of Domestication and a check for:

**FEES:**

Certificate of Domestication	\$ 50.00
Articles of Incorporation and Certified Copy	\$ <u>78.75</u>
Total to domesticate and file	\$128.75

**OPTIONAL:**

Certificate of Status \$ 8.75

**ELIZABETH RICKENBACKER SCHAEFER**

Name (printed or typed)

**35 E. GRASSY SPRAIN RD. #210**

Address

**YONKERS, NY 10710**

City, State & Zip

**(914) 337-7300**

Daytime Telephone Number

**ESCHAEFER@PURCHASEDEBT.COM**

E-mail address: (to be used for future annual report notification)

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AND  
FILED

**CERTIFICATE OF DOMESTICATION**

14 DEC 22 AM 8:47

The undersigned, JOEL RABINOWITZ, PRESIDENT  
(Name) (Title)  
of MANOR PORTFOLIO, INC., a foreign corporation,  
(Corporation Name)

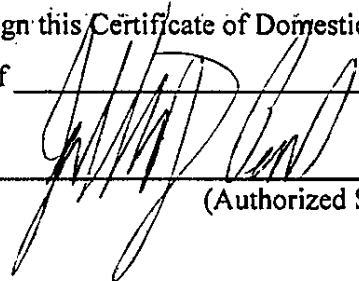
in accordance with s. 607.1801, Florida Statutes, does hereby certify:

1. The date on which corporation was first formed was MAY 8, 2014.
2. The jurisdiction where the above named corporation was first formed, incorporated, or otherwise came into being was NEW YORK.
3. The name of the corporation immediately prior to the filing of this Certificate of Domestication was MANOR PORTFOLIO, INC..
4. The name of the corporation, as set forth in its articles of incorporation, to be filed pursuant to s. 607.0202 and 607.0401 with this certificate is MANOR PORTFOLIO, INC..
5. The jurisdiction that constituted the seat, siege social, or principal place of business or central administration of the corporation, or any other equivalent jurisdiction under applicable law, immediately before the filing of the Certificate of Domestication was NEW YORK.
6. Attached are Florida articles of incorporation to complete the domestication requirements pursuant to s. 607.1801.

I am PRESIDENT, of MANOR PORTFOLIO, INC.

and am authorized to sign this Certificate of Domestication on behalf of the corporation and have done so this the 11<sup>th</sup> day of December, 2014.

X



(Authorized Signature)

**Filing Fee:**

Certificate of Domestication	\$ 50.00
Articles of Incorporation and Certified Copy	\$ 78.75
Total to domesticate and file	\$128.75

**ARTICLES OF INCORPORATION**  
*IN COMPLIANCE WITH CHAPTER 607, F.S.*

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**ARTICLE I NAME**

*THE NAME OF THE CORPORATION SHALL BE:*

MANOR PORTFOLIO, INC.

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE II PRINCIPAL OFFICE**

*THE PRINCIPAL PLACE OF BUSINESS/ MAILING ADDRESS IS:*

Principal Address

Mailing Address

6001 Broken Sound Parkway

9858 Clint Moore Rd.

Suite 504

Suite C-11 #217

Boca Raton, FL, 33487

Boca Raton, FL 33496

**ARTICLE III PURPOSE**

*THE PURPOSE FOR WHICH THE CORPORATION IS ORGANIZED:*

Any lawful purpose.

**ARTICLE IV   SHARES**

THE NUMBER OF SHARES OF STOCK IS: 200

**ARTICLE V   INITIAL DIRECTORS AND/ OR OFFICERS**

THE NAME(S) AND ADDRESS(ES) AND SPECIFIC TITLES:

Title/Name

President/Joel Rabinowitz

Title/Name

6001 Broken Sound Pkwy #504

Boca Raton, FL 33487

Title/Name

SECRETARY/SANDRA PALLEN

Title/Name

35 E. Grassy Sprain Rd #210

Yonkers, NY 10710

Title/Name

Title/Name

Title/Name

Title/Name

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**ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS** SECRETARY OF STATE  
THE NAME AND FLORIDA STREET ADDRESS (P.O. BOX NOT ACCEPTABLE) OF THE REGISTERED AGENT IS: TALLAHASSEE, FLORIDA

Joel Rabinowitz

6001 Broken Sound Pkwy #504

Boca Raton, FL 33487

**ARTICLE VII INCORPORATOR**

THE NAME AND ADDRESS OF THE INCORPORATOR IS:

Joel Rabinowitz

9858 Clint Moore Rd. Suite C-11 #217

Boca Raton, FL 33496

\*\*\*\*\*  
HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE  
STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I AM FAMILIAR WITH AND  
ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY.

X [Signature]  
Signature/Registered Agent

12-11-14  
Date

X [Signature]  
Signature/Incorporator

12-11-14  
Date